

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Friends of Joe Pitts

ADDRESS (number and street)

PO BOX 775

Check if different
than previously
reported. (ACC)

Unionville

PA

19375

2. FEC IDENTIFICATION NUMBER ▼

C

C00310136

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

PA

16

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer A. Duer Pierce

Signature of Treasurer

A. Duer Pierce

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

04

13

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

Friends of Joe Pitts

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	115500.00	118138.95
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	115500.00	118138.95
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35367.96	111474.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	35367.96	111474.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	176081.62	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 44

Write or Type Committee Name

Friends of Joe Pitts

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

3800.00

5860.00

(ii) Unitemized.....

200.00

778.95

(iii) TOTAL of contributions from individuals ▶

4000.00

6638.95

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

111500.00

111500.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

115500.00

118138.95

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

42.36

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

115500.00

118181.31

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 44

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	35367.96	111474.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	40000.00	40000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	8840.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	75367.96	160314.75

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	135949.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	115500.00
25. SUBTOTAL (add Line 23 and Line 24).....	251449.58
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	75367.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	176081.62

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 44

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Joe PittsFull Name (Last, First, Middle Initial)
A. Cynthia Broydrick

Mailing Address 221 Bamboo Rd

City	State	Zip Code
Palm Beach Shores	FL	33404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Broydrick AssocOccupation
Public Affairs

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2015

Transaction ID : C-26-03xk05

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
B. Nader Damaghi

Mailing Address 10 Shore Drive

City	State	Zip Code
Kings Point	NY	11024

FEC ID number of contributing
federal political committee.

C

Name of Employer
First Quality EnterprisesOccupation
Executive

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		09		2015

Transaction ID : C-31-04F901

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
C. Douglas Marshall

Mailing Address 1001 Meetinghouse Rd

City	State	Zip Code
West Chester	PA	19382

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alenia North AmericaOccupation
Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		20		2015

Transaction ID : C-48-03ns0D

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 44

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial) Douglas Marshall		Date of Receipt M M / D D / Y Y Y Y Y 02 / 19 / 2015
Mailing Address 1001 Meetinghouse Rd		Transaction ID : C-49-03ns0E
City West Chester	State PA	
Zip Code 19382		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Alenia North America	Occupation Manager	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) Douglas Marshall		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2015
Mailing Address 1001 Meetinghouse Rd		Transaction ID : C-50-03ns0F
City West Chester	State PA	
Zip Code 19382		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Alenia North America	Occupation Manager	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) Scott Rifkin		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2015
Mailing Address 1922 Greenspring Drive Ste 6		Transaction ID : C-67-04FA01
City Timonium	State MD	
Zip Code 21093		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Mid Atlantic Healthcare	Occupation Owner	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

Stuart ShapiroMailing Address **34 Llanberris Road**

City

Bala-Cynwyd

State

PA

Zip Code

19004FEC ID number of contributing
federal political committee.**C**Name of Employer
PHCAOccupation
President & CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2015

Transaction ID : **C-70-049G03**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**1000.00****3800.00**

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial) Abbott Labs PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015
Mailing Address 100 Abbott Park Road		Transaction ID : C-1-03IM09
City Abbott Park	State IL	
Zip Code 60064		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00040279		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Abbvie PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2015
Mailing Address 1 N Waukegan Rd		Transaction ID : C-2-048J04
City North Chicago	State IL	
Zip Code 60064		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00536573		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) AGA Trade PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015
Mailing Address 4926 Del Ray Avenue		Transaction ID : C-3-03hk0C
City Bethesda	State MD	
Zip Code 20814		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00423228		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial) American Health Care Association		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address Political Action Committee (AHCA-P) 1201 L Street NW		Transaction ID : C-4-02XD0E
City Washington State DC Zip Code 20005		
FEC ID number of contributing federal political committee. C C00006080		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

B. Full Name (Last, First, Middle Initial) American Academy of Otolaryngolgy		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 1650 Diagnol Rd		Transaction ID : C-5-03YP0G
City Alexandria State VA Zip Code 22314		
FEC ID number of contributing federal political committee. C C00306449		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

C. Full Name (Last, First, Middle Initial) Amer. Academy of Family Physicians		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2015
Mailing Address 2023 Massachusetts Ave., NW		Transaction ID : C-6-03Xt06
City Washington State DC Zip Code 20036		
FEC ID number of contributing federal political committee. C C00411553		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial)
Amer Academy Of Neurology (BrainPAC)

Mailing Address 1080 Montreal Ave

City	State	Zip Code
Saint Paul	MN	55116

FEC ID number of contributing federal political committee.

C C00435933

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Transaction ID : C-7-03ho09

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Amer. Coll. of Cardiology PAC

Mailing Address 2400 N. St NW

City	State	Zip Code
Washington	DC	20037

FEC ID number of contributing federal political committee.

C C00375360

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Transaction ID : C-8-035K0G

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Amer Medical Group Assoc

Mailing Address PO Box 26366

City	State	Zip Code
Alexandria	VA	22313

FEC ID number of contributing federal political committee.

C C00408120

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2015

Transaction ID : C-9-04FB01

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial)
Amer. Optometric Assoc. PAC

Mailing Address 1505 Prince Street, Ste 300

City State Zip Code
 Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 31 2015

Transaction ID : C-10-03a10V

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
American Osteopathic Information Assoc.

Mailing Address 1090 Vermont Ave., NW, Suite 510

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00113803

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 03 24 2015

Transaction ID : C-11-03TD09

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Amer. Psychological Assoc. Practice Organi

Mailing Address PO BOX 65353

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C C00522094

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 09 2015

Transaction ID : C-12-046g03

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

 Full Name (Last, First, Middle Initial)
A. Amer Soc of Health-System Pharmacists

Mailing Address 7272 Wisconsin Ave

City	State	Zip Code
Bethesda	MD	20814

FEC ID number of contributing federal political committee.

C C00245530

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2015

Transaction ID : C-13-03ge0D

Amount of Each Receipt this Period

1000.00

 Full Name (Last, First, Middle Initial)
B. Amer. Society of Anesthesiologists

Mailing Address 520 N. Northwest Hgwy.

City	State	Zip Code
Park Ridge	IL	60068

FEC ID number of contributing federal political committee.

C C00255752

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		09		2015

Transaction ID : C-14-03a20C

Amount of Each Receipt this Period

2000.00

 Full Name (Last, First, Middle Initial)
C. Ameri. Chiropractic Assoc.

Mailing Address 1701 Clarendon Blvd.

City	State	Zip Code
Arlington	VA	22209

FEC ID number of contributing federal political committee.

C C00102764

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2015

Transaction ID : C-15-03Qb06

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 44

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial)
American Association Of Orthopaedic Surgeo

Mailing Address 317 Massachussetts Ave. N.E.

City State Zip Code
Washington DC 20002

FEC ID number of contributing
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2015

Transaction ID : C-16-02xa0P

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
American Association of Nurse Anesthetists

Mailing Address CRNA PAC

25 Massachusetts Ave, NW ,Ste 550

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00173153

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 18 2015

Transaction ID : C-17-02xb0D

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
American College Surgeons PAC

Mailing Address 20 F St, NW, Ste 1000

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00382424

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 09 2015

Transaction ID : C-18-03Xx0B

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial)
American Hospital Assoc.

Mailing Address 325 Seventh Street, NW, Ste 700

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2015

Transaction ID : C-19-035S0G

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
Amgen PAC

Mailing Address One Amgen Center Drive

City Thousand Oaks	State CA	Zip Code 91320
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C-20-031I0J

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
APA PAC -American Psychiatric Assoc.

Mailing Address 1000 Wilson Blvd

City Arlington	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : C-21-03a509

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

Boehringer Ingelhelm PAC

Mailing Address 1120 G Street NW, Ste 1050

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00420398

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2015

Transaction ID : C-23-045b03

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

BRISTOL-MYERS SQUIBB COMPANY EMPLOYEE

Mailing Address 345 Park Ave.

City State Zip Code
New York NY 10154

FEC ID number of contributing
federal political committee.

C C00035675

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2015

Transaction ID : C-24-02uL06

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Caremark RX PAC

Mailing Address 1300 I St, NW Ste 525 West

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00384818

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
03 30 2015

Transaction ID : C-28-03Y107

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

5000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial) ChevronTexaco PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2015
Mailing Address PO Box 6016		Transaction ID : C-29-03KR09
City San Ramon	State CA	
FEC ID number of contributing federal political committee. C C00035006		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) DELOITTE AND TOUCHE LLP FEDERAL		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 30 / 2015
Mailing Address POLITICAL ACTION COMMITTEE PO Box 365		Transaction ID : C-32-01yM09
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00211318		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Direct Supply Inc Partners		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 09 / 2015
Mailing Address 6767 N Industrial Rd		Transaction ID : C-34-04Ak02
City Milwaukee	State WI	
FEC ID number of contributing federal political committee. C C00409516		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial)
Energy Transfer Partners PAC
Mailing Address 711 Louisiana St, Ste 900

City	State	Zip Code
Houston	TX	77002

FEC ID number of contributing
federal political committee.

C C00438754

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : C-35-04AW03

Amount of Each Receipt this Period

1500.00

B. Full Name (Last, First, Middle Initial)
Express Scripts
Mailing Address One Express Way

City	State	Zip Code
Saint Louis	MO	63121

FEC ID number of contributing
federal political committee.

C C00365072

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2015

Transaction ID : C-38-04Eg02

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
Faegre BD Consulting PAC
Mailing Address 1050 K Street NW, Ste 400

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing
federal political committee.

C C00215491

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : C-39-045d04

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL

Mailing Address **ACTION COMMITTEE**

1299 Pennsylvania Ave NW Ste 1100

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

02 / 26 / 2015

Transaction ID : **C-40-01Tx00**

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
GENESIS HEALTH CARE ANCILLARY CORP PAC

Mailing Address **101 East State Street**

City State Zip Code
Kennett Square PA 19348

FEC ID number of contributing
federal political committee.

C C00292094

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

03 / 09 / 2015

Transaction ID : **C-41-01Ko0b**

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
GlaxoSmith Kline PAC

Mailing Address **Five Moore Drive**

City State Zip Code
Research Triangle Pa NC 27709

FEC ID number of contributing
federal political committee.

C C00199703

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

03 / 31 / 2015

Transaction ID : **C-42-03800I**

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

Golden Horizons Care PAC**A.**

Mailing Address 1099 New York Ave., NW, Ste. 500

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.**C** C00346346

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2015

Transaction ID : C-43-049E03

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

HCR MANOR CARE PAC**B.**

Mailing Address 333 North Summit Street 16th Floor

P.O. Box 10086

City

Toledo

State

OH

Zip Code

43699

FEC ID number of contributing
federal political committee.**C** C00260141

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2015

Transaction ID : C-44-02XF04

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Merck PAC The Political Action Committee**C.**

Mailing Address For Merck & Co Inc.

601 Penn Avenue NW N Bldg Ste 1200

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.**C** C00097485

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : C-51-01Dr0J

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

Molina Healthcare PAC

Mailing Address 200 Oceangate, Ste 100

City

Long Beach

State

CA

Zip Code

90802

FEC ID number of contributing
federal political committee.

C C00430256

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

03 / **31** / **2015**

Transaction ID : C-52-03xs05

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Natl Assoc of Spine Specialists

Mailing Address 7075 Veterans Blvd

City

Burr Ridge, Il

State

Zip Code

60527

FEC ID number of contributing
federal political committee.

C C00349225

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

03 / **05** / **2015**

Transaction ID : C-53-048c02

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Natl Roofing Contractors Assoc

Mailing Address 10255 W Higgins Rd, No 600

City

Rosemont

State

IL

Zip Code

60018

FEC ID number of contributing
federal political committee.

C C00244863

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

03 / **05** / **2015**

Transaction ID : C-54-03dk0S

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial) NEMPAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2015	
Mailing Address National Emergency Med. PAC PO Box 619911		Transaction ID : C-55-03Wy01	
City	State	Zip Code	Amount of Each Receipt this Period 2500.00
Dallas	TX	75261	
FEC ID number of contributing federal political committee.		C C00140061	
Name of Employer		Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00	
B. Full Name (Last, First, Middle Initial) Neurosurgery PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2015	
Mailing Address 5550 Meadowbrook Ct		Transaction ID : C-56-03gd07	
City	State	Zip Code	Amount of Each Receipt this Period 2500.00
Rolling Meadows	IL	60008	
FEC ID number of contributing federal political committee.		C C00413955	
Name of Employer		Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00	
C. Full Name (Last, First, Middle Initial) Novartis PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 09 / 2015	
Mailing Address 701 Pennsylvania Ave., NW, Suite 7		Transaction ID : C-57-03Jv08	
City	State	Zip Code	Amount of Each Receipt this Period 2500.00
Washington	DC	20004	
FEC ID number of contributing federal political committee.		C C00033969	
Name of Employer		Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00	
SUBTOTAL of Receipts This Page (optional).....		7500.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

OB-GYN PAC

Mailing Address 409 12th Street, SW

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing
federal political committee.

C C00364158

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 31 2015

Transaction ID : C-58-044D05

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

OPHTHPAC American Academy of Ophthalmology

Mailing Address 1101 Vermont Ave. N.W. Suite 700

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00196246

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 30 2015

Transaction ID : C-59-02xo0F

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Pharmaceutical Research Manuf. of America

Mailing Address 950 F St, NW, Ste 300

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00021972

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 18 2015

Transaction ID : C-60-03z704

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

RADPACMailing Address **American College Of Radiology PAC****1891 Preston White Drive**

City	State	Zip Code
Reston, Va		20191

FEC ID number of contributing federal political committee.

C **C00343459**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : C-64-039Q0S

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Rheum PACMailing Address **2200 Lake Blvd N.E.**

City	State	Zip Code
Atlanta	GA	30319

FEC ID number of contributing federal political committee.

C **C00432823**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Transaction ID : C-66-03sw08

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

RPA PAC -Renal Physicians AssocMailing Address **1700 Rockville Pike, Ste 220**

City	State	Zip Code
Rockville	MD	20852

FEC ID number of contributing federal political committee.

C **C00409391**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : C-68-03yD06

Amount of Each Receipt this Period

1000.00**SUBTOTAL** of Receipts This Page (optional).....**4500.00****TOTAL** This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

Sanofi Pasteur PAC

Mailing Address 801 Pennsylvania Ave, St 725

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00215236

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
02 26 2015

Transaction ID : C-69-03Vw0B

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

Skin PAC

Mailing Address American Academy Of Dermatology As
1350 I Street, NW ,Suite 880

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00359539

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 24 2015

Transaction ID : C-71-03530E

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Society of Thoracic Surgeons

Mailing Address 20 F Street, NW Ste 310

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00325936

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 30 2015

Transaction ID : C-72-03XD09

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 44

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

A. Full Name (Last, First, Middle Initial) Society for Vascular Surgery PAC		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		24		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
03		24		2015									
Mailing Address 633 N. St. Clair St., 24th Floor		Transaction ID : C-73-03X50B											
City Chicago	State IL	Zip Code 60611											
FEC ID number of contributing federal political committee. C C00381459		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>							2000.00				
					2000.00								
Name of Employer 		Occupation 											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2000.00</td> </tr> </table>							2000.00				
					2000.00								

B. Full Name (Last, First, Middle Initial) Teva PAC		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>31</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		31		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
03		31		2015									
Mailing Address 1090 Horsham Rd PO Box 1090		Transaction ID : C-75-03zr05											
City North Wales	State PA	Zip Code 19454											
FEC ID number of contributing federal political committee. C C00434811		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1500.00</td> </tr> </table>							1500.00				
					1500.00								
Name of Employer 		Occupation 											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1500.00</td> </tr> </table>							1500.00				
					1500.00								

C. Full Name (Last, First, Middle Initial) The Doctor's Co. Federal PAC, DocPac		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		24		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
03		24		2015									
Mailing Address 185 Greenwood Road		Transaction ID : C-76-03XR06											
City Napa	State CA	Zip Code 94558											
FEC ID number of contributing federal political committee. C C00300376		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1500.00</td> </tr> </table>							1500.00				
					1500.00								
Name of Employer 		Occupation 											
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1500.00</td> </tr> </table>							1500.00				
					1500.00								

SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5"></td> <td>5000.00</td> </tr> </table>							5000.00
					5000.00				
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>							

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 44

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

Vertex Pharmaceuticals PAC

Mailing Address 1201 Maryland Ave, SW Ste 850

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing
federal political committee.**C** C00468660

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2015

Transaction ID : C-77-03x004

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

ZENECA INC POLITICAL ACTION COMMITTEE

Mailing Address AZ PAC

PO Box 15437

City

Wilmington

State

DE

Zip Code

19850

FEC ID number of contributing
federal political committee.**C** C00279455

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2015

Transaction ID : C-80-01DF0G

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

111500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. 1ST Natl Bank of Chester County

Mailing Address 126 West Cypress Street

City	State	Zip Code
Kennett Square	PA	19348

Purpose of Disbursement
Federal Tax Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2015

Amount of Each Disbursement this Period

1113.62

Transaction ID : D4-01EC9C

B. 1ST Natl Bank of Chester County

Mailing Address 126 West Cypress Street

City	State	Zip Code
Kennett Square	PA	19348

Purpose of Disbursement
Federal Tax Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2015

Amount of Each Disbursement this Period

1577.66

Transaction ID : D5-01EC9D

C. 1ST Natl Bank of Chester County

Mailing Address 126 West Cypress Street

City	State	Zip Code
Kennett Square	PA	19348

Purpose of Disbursement
Federal Tax Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2015

Amount of Each Disbursement this Period

126.00

Transaction ID : D6-01EC9E

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2817.28

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. 1ST Natl Bank of Chester County

Mailing Address 126 West Cypress Street

City	State	Zip Code
Kennett Square	PA	19348

Purpose of Disbursement
Federal Tax Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Amount of Each Disbursement this Period

873.80

Transaction ID : D7-01EC9F

B. 1ST Natl Bank of Chester County

Mailing Address 126 West Cypress Street

City	State	Zip Code
Kennett Square	PA	19348

Purpose of Disbursement
Federal Tax Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	13	/	2015

Amount of Each Disbursement this Period

863.68

Transaction ID : D8-01EC9G

c. Action of PA

Mailing Address 3121-A Mount Joy Road

City	State	Zip Code
Mount Joy	PA	17552

Purpose of Disbursement
Ticket Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01	/	09	/	2015

Amount of Each Disbursement this Period

250.00

Transaction ID : D9-04AF06

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1987.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. America On Line

Mailing Address 2200 Aolway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2015

City	State	Zip Code
Dulles	VA	20166

Purpose of Disbursement
Internet Expense

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

40.99

Transaction ID : D13-04Ab0E

B. America On Line

Mailing Address 2200 Aolway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2015

City	State	Zip Code
Dulles	VA	20166

Purpose of Disbursement
Internet Expense

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

40.99

Transaction ID : D14-04Ab0F

C. America On Line

Mailing Address 2200 Aolway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2015

City	State	Zip Code
Dulles	VA	20166

Purpose of Disbursement
Internet Expense

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

40.99

Transaction ID : D15-04Ab0G

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

122.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Area 16

Mailing Address 2335 West Chester Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2015

City	State	Zip Code
Coatesville	PA	19320

Purpose of Disbursement
Ticket Expense

Amount of Each Disbursement this Period

1250.00

Transaction ID : D16-048b03

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO Box 371302

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2015

City	State	Zip Code
Mellon Bank	PA	15250

Purpose of Disbursement
Telephone Expense

Amount of Each Disbursement this Period

81.71

Transaction ID : D18-01E434

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO Box 371302

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2015

City	State	Zip Code
Mellon Bank	PA	15250

Purpose of Disbursement
Telephone Expense

Amount of Each Disbursement this Period

81.86

Transaction ID : D19-01E435

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1413.57

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address PO Box 371302

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2015

City	State	Zip Code
Mellon Bank	PA	15250

Purpose of Disbursement
Telephone Expense

Amount of Each Disbursement this Period

81.86

Transaction ID : D20-01E436

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Capitol Hill Club

Mailing Address 300 First Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Catering Expense

Amount of Each Disbursement this Period

213.42

Transaction ID : D28-01EJ3K

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Capitol Hill Club

Mailing Address 300 First Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Catering Expense

Amount of Each Disbursement this Period

708.81

Transaction ID : D29-01EJ3L

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1004.09

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 First Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Catering Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2015

Amount of Each Disbursement this Period

742.38

Transaction ID : D30-01EJ3M

B. Capitol Office Supply StoreMailing Address B217
Longworth House Office Bldg.

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement
Office Supply Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2015

Amount of Each Disbursement this Period

12.60

Transaction ID : D34-024y0U

c. Capitol Office Supply StoreMailing Address B217
Longworth House Office Bldg.

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement
Office Supply Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2015

Amount of Each Disbursement this Period

141.30

Transaction ID : D35-024y0V

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

896.28

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Carole Goeas & Assoc.

Mailing Address 1707 Prince Street, #5

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Fundraising Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2015

Amount of Each Disbursement this Period

13570.13

Transaction ID : D37-03d80t

B. Comcast

Mailing Address 1500 Market St

City	State	Zip Code
Philadelphia	PA	19102

Purpose of Disbursement
Internet Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2015

Amount of Each Disbursement this Period

235.71

Transaction ID : D40-03gW0N

C. Hannibal Software Inc.Mailing Address 611 Pennsylvania Avenue SE
Suite 345

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Software Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : D52-01EL0I

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

14805.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Martin Luther King Breakfast

Mailing Address 409 Center Street

City	State	Zip Code
Kennett Square	PA	19348

Purpose of Disbursement
Ticket Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2015

Amount of Each Disbursement this Period

315.00

Transaction ID : D60-02sP06

B. Lancaster Tax Bureau

Mailing Address 1845 William Penn Way

City	State	Zip Code
Lancaster	PA	17601

Purpose of Disbursement
Tax Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2015

Amount of Each Disbursement this Period

79.63

Transaction ID : D62-03h80W

C. Lancaster Tax Bureau

Mailing Address 1845 William Penn Way

City	State	Zip Code
Lancaster	PA	17601

Purpose of Disbursement
Tax Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2015

Amount of Each Disbursement this Period

125.37

Transaction ID : D63-03h80X

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

520.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Lancaster Tax Bureau

Mailing Address 1845 William Penn Way

City	State	Zip Code
Lancaster	PA	17601

Purpose of Disbursement
Tax Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2015

Amount of Each Disbursement this Period

54.00

Transaction ID : D64-03h80Y

B. Gabriel Neville

Mailing Address 8918 Grand Staff Ct.

City	State	Zip Code
Springfield	VA	22153

Purpose of Disbursement
Payroll Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2015

Amount of Each Disbursement this Period

509.33

Transaction ID : D81-01W90j

C. Gabriel Neville

Mailing Address 8918 Grand Staff Ct.

City	State	Zip Code
Springfield	VA	22153

Purpose of Disbursement
Payroll Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2015

Amount of Each Disbursement this Period

509.33

Transaction ID : D82-01W90k

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1072.66

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. NWL Tavern

Mailing Address 1001 Lafayette Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2015

City	State	Zip Code
Farmington	PA	15437

Amount of Each Disbursement this Period

475.24

Purpose of Disbursement
Lodging ExpenseCategory/
Type

Transaction ID : D84-046705

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Osprey Point Conference/Trinity Forum

Mailing Address 7902 West Park Drive, Suite A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2015

City	State	Zip Code
Mc Lean	VA	22102

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Conference ExpenseCategory/
Type

Transaction ID : D87-02rh0B

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Osprey Point Conference/Trinity Forum

Mailing Address 7902 West Park Drive, Suite A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2015

City	State	Zip Code
Mc Lean	VA	22102

Amount of Each Disbursement this Period

125.00

Purpose of Disbursement
Retreat ExpenseCategory/
Type

Transaction ID : D88-02rh0C

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1600.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. PA Dept. of Revenue

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2015

City	State	Zip Code
Harrisburg	PA	17128

Purpose of Disbursement
Payroll Tax

Amount of Each Disbursement this Period

195.56

Transaction ID : D89-01L41k

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. PA Dept. of Revenue

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2015

City	State	Zip Code
Harrisburg	PA	17128

Purpose of Disbursement
Payroll Tax

Amount of Each Disbursement this Period

259.71

Transaction ID : D90-01L41I

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Penn Manor GOP Comm.

Mailing Address 3175 Anchor Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2015

City	State	Zip Code
Washington Borough	PA	17582

Purpose of Disbursement
Ticket Expense

Amount of Each Disbursement this Period

315.00

Transaction ID : D94-03A70E

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

770.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Joseph Pitts

Mailing Address 905 Mitchell Farm Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2015

City	State	Zip Code
Kennett Square	PA	19348

Amount of Each Disbursement this Period

541.70

Purpose of Disbursement
Reimbursement Expense

Candidate Name

Category/
Type

Transaction ID : D98-01EG1a

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Full Name (Last, First, Middle Initial)

B. Prestige Color

Mailing Address 19 Prestige Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2015

City	State	Zip Code
Lancaster	PA	17603

Amount of Each Disbursement this Period

1427.66

Purpose of Disbursement
Printing Expense

Candidate Name

Category/
Type

Transaction ID : D100-03fp0B

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

Full Name (Last, First, Middle Initial)

c. Thomas Tillett

Mailing Address 3851 Sterling Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2015

City	State	Zip Code
Columbia	PA	17512

Amount of Each Disbursement this Period

489.08

Purpose of Disbursement
Payroll Expense

Candidate Name

Category/
Type

Transaction ID : D123-016y0q

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2458.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 21 Baltimore Pike

City	State	Zip Code
Kennett Square	PA	19348

Purpose of Disbursement
Telephone Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2015

Amount of Each Disbursement this Period

258.59

Transaction ID : D139-03nD0k

B. Verizon Wireless

Mailing Address 1 Centerville Rd

City	State	Zip Code
Lancaster	PA	17601

Purpose of Disbursement
Telephone Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2015

Amount of Each Disbursement this Period

143.25

Transaction ID : D142-044g0N

C. Verizon Wireless

Mailing Address 1 Centerville Rd

City	State	Zip Code
Lancaster	PA	17601

Purpose of Disbursement
Telephone Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2015

Amount of Each Disbursement this Period

96.85

Transaction ID : D143-044g0O

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

498.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 1 Centerville Rd

City	State	Zip Code
Lancaster	PA	17601

Purpose of Disbursement
Telephone Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2015

Amount of Each Disbursement this Period

234.72

Transaction ID : D144-044g0P

B. Jerri Wier

Mailing Address 74 Light Farm Drive

City	State	Zip Code
Cochranville	PA	19330

Purpose of Disbursement
Payroll Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2015

Amount of Each Disbursement this Period

1437.84

Transaction ID : D150-03ft1y

C. Jerri Wier

Mailing Address 74 Light Farm Drive

City	State	Zip Code
Cochranville	PA	19330

Purpose of Disbursement
Payroll Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2015

Amount of Each Disbursement this Period

706.94

Transaction ID : D151-03ft1z

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2379.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 44

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. Jerri Wier

Mailing Address 74 Light Farm Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2015

City	State	Zip Code
Cochranville	PA	19330

Purpose of Disbursement
Payroll Expense

Amount of Each Disbursement this Period

675.74

Transaction ID : D152-03ft20

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

675.74

33796.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 44

<input type="checkbox"/> 17	<input checked="" type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Joe Pitts

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Cmte

Mailing Address 320 First Street, SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2015

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Transfer Expense

Amount of Each Disbursement this Period

40000.00

Transaction ID : D83-01Kn0q

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

--

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

--

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

40000.00

40000.00
